

ISSUE SLIP STAPLE AREA (for additional cross references)

EMR
10/21/00
10/25/00

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	J.B.	22222-11-00	
O.I.P.E. CLASSIFIER		19	21-20
FORMALITY REVIEW	Wt-	571	10/26/00
RESPONSE FORMALITY REVIEW	Rm	78	23-26-01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Final	Original	Date
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
 staple additional sheet here

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